



TENNESSEE HOME INSPECTOR LICENSING BOARD

Department of Commerce and Insurance
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Nashville, TN 37243
615-741-1741
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www.state.tn.us/commerce/boards/hic/index.html

CONTINUING EDUCATION - COURSE SPONSOR APPLICATION

FOR OFFICE USE ONLY

Date Received _____

() Approved () Disapproved

Course # _____

Please Type or Print Legibly

GENERAL INSTRUCTIONS

Application for approval as a continuing education provider must be made on this form. The application must be typed or printed in ink, and all items must be completed. This application must be submitted to the commissioner no later than 30 days prior to the scheduled date of the course.

CONTINUING EDUCATION PROVIDER

Name of Course Sponsor _____

Address _____

(Provide Street Address and also P.O. Box if any, & include zip code for each)

(City) (State) (Street Address Zip Code) P.O. Box Zip Code ()
(Telephone)

Contact Person _____ Telephone _____

Address _____ Fax # _____

City State Zip Code E-mail: _____

COURSE INFORMATION

Number of Contact Hours Requested _____

Course Title _____

Course Content _____ ***Please attach a detailed outline or a copy of the course curriculum*** _____

(If the Tennessee Home Inspector Licensing Program has not approved this course for continuing education, **or** was previously approved, but course content has changed significantly, you will be required to submit the course content documentation)

Location of course or seminars _____

Street Address

City

State

Zip Code

CONTINUING EDUCATION INSTRUCTOR APPLICATION

NAME OF INSTRUCTOR _____

Employee of _____

Instructor Qualifications _____ ***Please Attach Resume(s)*** _____

Per the Tennessee Home Inspector License Act of 2005, this form must be completed in order for the Tennessee Home Inspector Licensing Program to consider approving your course/seminar for their Continuing Education Program. Please provide all information requested.

The Tennessee Home Inspector Licensing Program will review and revise this form as needed.